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DEVELOPMENT PLAN  
THE MASSACHUSETTS GENERAL HOSPITAL  
BOSTON, MASSACHUSETTS

I. INTRODUCTION

The Massachusetts General Hospital is a non-profit teaching general hospital located in the west end of Boston in an area of 19.3 acres bound by Blossom Street on the north and east, by Cambridge and Fruit Streets on the south, and by Charles and North Grove Streets on the west.

The growth of the hospital has been one of nearly constant change since 1823, when the Bulfinch Building was completed on the original 4 acre site chartered by the Commonwealth. At that time, the tidal basin of the Charles River abutted this original building and served as the western boundary of the 4 acre site. By 1863 a new sea wall had been built and the river flats had been filled in to provide additional land to the west, on which a number of small pavilions were constructed and demolished through 1901. The pavilions, at the time, represented the latest concept in patient care facilities. None of the original buildings, built during that period, remain today. In their place stand the George Robert White Building, Baker Memorial, Phillips House, Surgical and Special Services Building, Warren Building, as well as the Cancer Management Center now under construction.

The old Harvard Medical School was located immediately to the south of the original site in the area of the existing entrance ramp to the White Building. This property was purchased in 1909 and demolished in 1911 to make way for the continuing development of the land along the north side of Fruit Street. The present Clinics Building had been erected by 1901 on land acquired in 1898. The Moseley Building was erected in 1914. Beginning in 1909, the Hospital continued with the purchase of land between Fruit and Cambridge Streets on both sides of North Grove Street with the final purchase being made in 1941. Two recently completed parking structures now stand on these sites.

In the period 1921 to 1943, the old residential property on the north side of Parkman Street was purchased in parcels by the Hospital. Most of these buildings were razed when purchased with only 30 Blossom Street and 17, 19, and 21 Parkman Street standing until January of 1973, when they were demolished. With the acquisition of this group of properties, the entire block between Blossom Street to the north and east, Charles to the west, and Fruit and Parkman Streets to the south evolved as the primary locus of the Massachusetts General Hospital as it stands today.

## II. DEVELOPMENT PLAN: GENERAL CONCEPTS

In order to continue to be a responsible provider of health care, The Massachusetts General Hospital has had to plan for continued development. As part of its continuing recent development process MGH has identified needs and implemented programs to meet both its long and short term goals, both on and off its major site.

In general, the activity has included acquisition, land clearance and/or rehabilitation and construction. Specific programs have been geared to provide.

- 1) Advanced medical facilities (The construction of the Gray Building to provide in-patient care facilities and the Cancer Management Building to respond to the demand for an integrated program for cancer care.)
- 2) Nurses' housing and teaching facilities (through a program of rent subsidy at Charles River Park and the conversion of 20 Charles Street to a nurses' teaching and residential facility).
- 3) Adequate parking (through the acquisition of 248-270 Cambridge Street - parking garage for 170 cars, acquisition of property on Nashua Street for 800 cars, and the construction of two garages on hospital property at North Grove Street for 1400 cars).
- 4) Workshop facilities (through conversion of properties at 14 Garden Street, and 9 and 11 Irving Street).

The Hospital's site is closed to the north and east by the development of the West End Urban Renewal Project. On the southwest, the Suffolk County (Charles Street) Jail continues to influence planning for the future needs of the Hospital. The primary focus of current development activity has, therefore, been focused both within its present site and the site bounded by No. Anderson, Parkman, Blossom and Cambridge Streets. Recognizing the need for additional facilities within these areas, but also the impact of this activity on the adjacent community, the Hospital has reevaluated these activities to determine how its develop-

ment objectives can be coordinated with the objectives of the surrounding community and the needs of the City to produce an overall development plan which meets the objectives of all. In order to coordinate its development objectives with its neighbors, including the Massachusetts Eye and Ear Infirmary, the Charles River Park development and residential Beacon Hill, the Hospital has participated in the formation of the Cambridge Street Community Development Corporation. In addition to the Hospital, the other participants in the corporation are the Massachusetts Eye and Ear Infirmary and the Beacon Hill Civic Association. It is the intent of the CSCDC to work with the BRA, Charles River Park Association and other agencies and interests to achieve a cohesive development plan for the Cambridge Street area which will support and be compatible with the existing community while at the same time helping the MGH and the Massachusetts Eye and Ear Infirmary to meet the health needs of the city.

### III. DEVELOPMENT PLAN: SPECIFIC DEVELOPMENT ACTIVITIES

#### 1. Completed Development Activity

A table of dates of acquisition, costs of acquisition and costs of demolition, arranged by property, is attached as Appendix I. Parcel numbers refer to the designations on development plan map S-I.

- a. Parcel 18, 20 Charles Street. At the time of purchase in 1959, this property was a hotel. It was noncompetitive and a losing business because of such obsolete features as its lack of air-conditioning facilities. It has been rehabilitated to serve as a student nurse dormitory through the installation of new boilers, new lighting, new elevators, and new furnishings. The first floor bar and meeting rooms have been converted into class-rooms and recreation rooms for nurses' training.

- b. Parcel 19, Nashua Street Parking Lot. This property was a railroad yard formerly owned by the Boston and Maine Railroad. At the time of purchase, it was an abandoned and obsolete area, with trackage removed and platforms deteriorated and useless. The Hospital expended funds to remove deteriorated platforms and grade and hardtop the area. The property is maintained by the MGH as a parking lot. For the foreseeable future this facility is essential to the operation of the Hospital. The parking facility is necessary to accommodate the large staff of the Hospital. The parking facility operates at maximum capacity and a two-month waiting list exists to obtain a parking permit. Until such time as a better mass transportation system is available, the parking facility is an essential component of the Hospital's physical plant.
- c. Parcel 19A, Massachusetts Rehabilitation Hospital Site. This parcel was originally part of the above larger area previously used for railroad purposes. The property is the location of the above hospital, a non-profit organization, which provides extended care services for those patients no longer requiring intensive hospital care.
- d. Parcel 8, Blossom Street (Northeast). This property was an open site and was purchased from the City of Boston in April 1964. It had been created as usable land area when the routing of Blossom and Old Allen Street was changed in the planning of the Charles River Park.
- e. Parcels 9 through 17, Parking Structures. These parcels were acquired and demolished in order to create the two

off-street parking structures now existing on either side of North Grove Street. They are as follows:

Parcel No. 9: 4 and 16 No. Grove Street. Both properties were demolished in 1959. The Massachusetts General Hospital had owned these buildings since 1954 and had kept them in use as dormitory facilities. Both buildings became obsolete with the completion of a new dormitory (Bartlett Hall) and were demolished in 1959 as blighted property.

Parcel No. 10: 12 No. Anderson Street. Demolished in 1960 as a blighted residence.

Parcel No. 11: 14 No. Anderson Street. Demolished in 1960 as a blighted residence.

Parcel No. 12: 16 and 18 No. Anderson Street. Demolished in 1960 as blighted residences.

Parcel No. 13: 30 No. Anderson Street. Demolished in 1956 as a blighted residence.

Parcel No. 14: 26 and 28 No. Anderson Street. Demolished in 1956 as blighted residences.

Parcel No. 15: 22 No. Anderson Street. Demolished in 1956 as a blighted residence.

Parcel No. 16: 24 No. Anderson Street. Demolished in 1956 as a blighted residence.

Parcel No. 17: 20 No. Anderson Street. Demolished in 1956 as a blighted residence.

The total capacity of both these parking structures is 1,487 spaces.

f. Parcel 1: 16-18 Blossom Street, the former West End House.

When purchased in June, 1965, this property was a vacant building formerly used as an athletic and activities center but obsolete for this function. It had been utilized in its earlier days by residents of the West End and the Beacon Hill residential communities. The MGH has renovated the first floor for office space for child research studies and interview rooms and modified the basement for medical engineering offices and a repair shop.

g. Parcel 2: 24 Blossom Street (Winchell School). When purchased in 1963 this property was a deteriorated, obsolete and closed elementary school building owned by the City of Boston. The building was sound, structurally, but had been poorly maintained. On the interior, toilets were in very bad shape, the heating system was worn out and wiring was in poor condition. On the exterior, the brownstone trim had eroded, roofing was in fair condition. The grounds were either gravel surfaced or blacktopped to serve as playgrounds for students. The property has been completely renovated to provide an educational building for the Massachusetts General Hospital School of Nursing.

Each of these developments are compatible with the conditions and uses in the adjacent West End Project Area.

## 2. Contemplated Development Activity

As indicated in Section II, MGH is contemplating additional development in conjunction with the Cambridge Street Community Development Corporation. Among the development activities under consideration are the following:

- a. The property indicated on the Development Plan Maps-1 as Present Shop Building is part of Parcel 3 in the CSCDC plans. As indicated in the Corporation's Progress Report, it would be desirable for the Hospital at some future date to relocate this shop to allow its reuse in support of the residential district. No credit under Section 112 of the Federal Housing Act is therefore anticipated.
- b. The property indicated as present parking garage in Map S-1 is part of Parcel 4A in the CSCDC. The Hospital plans to convert this property to residential use, to be developed by the CSCDC. This conversion is a major feature of the Hospital's plan to consolidate its development so as to maximize residential development within the Beacon Hill community.

As reported in the CSCDC Progress Report, page 23:

"CSCDC proposes that new housing and a re-designed playground be constructed on Parcel 4A. Assuming market feasibility, a modest amount of new retail space would be included in the scheme, along the ground floor of the Cambridge Street Frontage."

Since the reuse of this acquisition would not be for Hospital services, no credit for this property will be requested.

- c. In the block bounded by Blossom, Parkman, North Anderson and Cambridge Streets, known as Parcel 4B in the CSCDC plan, the hospital has acquired parcels 1 and 2 mentioned above and the following properties:

Parcel No. 3: 15-17 No. Anderson Street. When demolished in November of 1958 the property was a blighted residence and useless for any other occupancy.

Parcel No. 4: 33 No Anderson Street. When demolished in October of 1965, the building was in a state of collapse and was declared unsafe by the City of Boston.

Parcel No. 5: 38 Parkman Street. When demolished in October of 1965, this property was in a state of collapse and declared unsafe by the City of Boston

Parcel No. 6: 5 Bridge Court.

This property was a blighted residence and was demolished in June of 1959.

Parcel No. 7: 7 Bridge Court.

This property was a blighted residence and was demolished in April of 1958.

The parcels not yet acquired are included in the Development Plan area for which credit is claimed and are eligible by virtue of the presence of the following factors:

- a) Unsafe, poorly designed streets (No. Anderson and Parkman Streets and Bridge Court).
- b) Obsolete building layouts
- c) Overcrowding of structures of the land
- d) Introduction of mixed uses such as parking lots and spas
- e) General characteristics of obsolescence

The remaining parcels, surveyed from the exteriors, are:

Parcel No. 20: 11-13 No. Anderson Street.  
Buildings are obsolete; in fair condition.

Parcel No. 21: 19 No. Anderson Street.  
Building is obsolete; in fair condition.

Parcel No. 22: 23-25 No. Anderson Street.  
Buildings are in fair condition. Mixed uses have been introduced.

Parcel No. 23: 6 Bridge Court.  
Building is leaning and in poor condition.

Parcel No. 24: 8 Bridge Court.  
Vacant lot.

Parcel No. 25: 27 No. Anderson Street.  
Building is in fair condition.

Parcel No. 26: 29 No. Anderson Street.  
Building is in fair condition.

Parcel No. 27: 31 No. Anderson Street.

Building is in fair condition.

Parcel No. 28: 10-12 Blossom Street.

Buildings are in poor condition.

247-239 Cambridge Street.

Structures are unsuited to the neighborhood unless incorporated through new design into an overall plan for the block.

8 Blossom Street.

Buildings are in fair condition; include mixed uses.

The block bounded by Blossom, Parkman, North Anderson and Cambridge Streets is presently under restudy. Two buildings in the block (the former West End House and the former Winchell School) have been rehabilitated for hospital support facilities.

The only change which will have to be made to the street layout concerns the roads adjacent to the redevelopment parcel. The changes in street layout could range from the construction of a new street, such as the extension of Fruit Street, to widening and signalization.

Zoning, with the exception of the redevelopment parcel which is generally bounded by Cambridge, Blossom, Anderson and Parkman Streets will remain at its current designation.

Any changes in zoning, street layout and land use in the block currently being assembled, and which has been given the designation Parcel 4B by the CSCDC, will be compatible with conditions and uses in the adjacent West End Project Area and Cambridge Street area. Should new development proposals require changes in existing zoning, such zoning changes will come before the appropriate city planning and zoning agencies in accordance with established regulations and procedures.

The ultimate plan for the center on the Parcel, however, will be the result of planning for this parcel and the adjacent area, undertaken by the Cambridge Street Development Corporation. This planning

program is now fully underway. The Corporation has hired a director and engaged an urban planner and designer to develop a comprehensive plan for both parcels. It has actively solicited public interest in this planning process, holding two public meetings and canvassing the Beacon Hill area. The resulting plan will be reviewed by the Beacon Hill Historic Commission.

The Hospital has agreed to involve itself in such an arduous planning process because it intends to create a Center which will be of the greatest benefit to the surrounding community. The result of this commitment is that the Development Plan cannot specify the new uses for the site. Final designation of land uses awaits completion of the full planning process, culminating in approval by the Boston Redevelopment Authority and all other agencies having jurisdiction over the development. Since the full planning process for Parcel 4B is not complete it is understood that the rights of the abutters to object to the plan are not foreclosed. The Hospital realizes that any changes in the plan as currently formulated will have to be approved by the appropriate public agencies.

Should the planning process not result in a proposal which the three parties in the corporation can consent to or which does not get Boston Redevelopment Authority approval, the Hospital will continue to use Parcels 1 and 2 of Map S-1 for hospital purposes and will request credits for those properties on this basis.

The distribution of eligible Section 112 credits would, of course, be changed to reflect the pattern of hospital land uses. Accordingly, the Hospital has indicated in Appendix I all costs already incurred in Parcel 4B as well as those it anticipates incurring. It proposes

that this plan be accepted as the basis for credit certification of Parcel 4B at the time of financial settlement of the West End Assembly and Redevelopment Project. At that time, it will submit a statement of its progress in further defining and implementing the document, together with a final statement of eligible costs for Section 112 certification. So long as this plan does not substantially differ from the objectives of this development plan, it proposes that these costs be accepted as the Hospital's donation to the local share of Boston's urban renewal program.

#### IV. SUMMARY

Although additional and more detailed planning remains to be done in relation to the Development Plan, the Hospital respectfully submits that the Plan, in its present form, together with the Appendix and Map, adequately defines the objectives of the Hospital and its general plans for future expansion and construction.

The Hospital's plans have been designed to fit within the context of a larger development plan for the Cambridge Street area, and Charles River Park area. It is the hope of the Hospital officials that its proposals will be part of a larger solution to development possibilities on Cambridge Street, arrived at by all the parties making up the Cambridge Street community, in which the CSCDC has served as a catalyst. The presentation of this Development Plan evidences the willingness of the Hospital to join with the City and other institutions and groups in the Cambridge Street community to bring about the enhancement of the area.

APPENDIX I

THE MASSACHUSETTS GENERAL HOSPITAL

112 CREDIT PROPERTIES WEST END URBAN RENEWAL PROJECT

<u>ITEM NO.</u>	<u>PROPERTY</u>	<u>DATE PURCHASED</u>	<u>PURCHASE PRICE</u>	<u>DEMOLITION COSTS</u>
1	16-18 Blossom St. (West End House)	June, 1965	\$401,396.60	--
2	24 Blossom St. (Winchell School)	August, 1963	125,941.65	--
3	15-17 No. Anderson St.	November, 1958	31,200.88	Not Known
4	33 No. Anderson St.	October, 1965	29,598.59	Not Known
5	38 Parkman St.	October, 1965	7,149.42	Not Known
6	5 Bridge Court	June, 1959	6,633.00	Not Known
7	7 Bridge Court	April, 1958	5,933.00	Not Known
8	Lot at northeast corner of site on Blossom Street	April, 1964	--	--
9	4 and 16 No. Grove St.	1954	32,057.15	\$5,885.00
10	12 No. Anderson St.	October, 1960	22,186.19	
11	14 No. Anderson St.	January, 1958	13,133.50	) 5,000.00
12	16-18 No. Anderson St.	November, 1957	26,186.79	)
13	30 No. Anderson St.	January, 1956	13,142.60	1,200.00
14	26-28 No. Anderson St.	June, 1953	22,385.00	2,400.00
15	22 No. Anderson St.	December, 1955	11,763.25	1,200.00

## Appendix I (cont.)

<u>ITEM NO.</u>	<u>PROPERTY</u>	<u>DATE PURCHASED</u>	<u>PURCHASE PRICE</u>	<u>DEMOLITION COSTS</u>
16	24 No. Anderson St.	July, 1956	\$ 13,332.50	\$ 1,200.00
17	20 No. Anderson St.	November, 1948	12,128.00	1,200.00
18	20 Charles St.	1959	420,706.04	--
19	Nashua St. Parking Lot	1965	1,222,523.28	--
19A	Mass. Rehabilitation Hospital	1965	623,567.00	--
20	17-21 Parkman & 30 Blossom St.	Prior to 1948	--	15,600.00
		TOTAL	\$3,040,964.44	\$33,685.00

On this matter of the properties pending acquisition, it is estimated that the total purchase prices for all such properties should total about \$2,140,000 based on current market values. As noted earlier, at the time of final settlement of the West End Land Assembly and Redevelopment Project, final acquisition costs of those subject properties acquired at that time will be submitted for purpose of computing the exact 112 credits involved.

TABLED: DECEMBER 19, 1974

RESUBMITTED: DECEMBER 26, 1974

## MEMORANDUM

TO: BOSTON REDEVELOPMENT AUTHORITY  
FROM: ROBERT T. KENNEY  
SUBJECT: MASSACHUSETTS GENERAL HOSPITAL DEVELOPMENT PLAN

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2990  
12/19

On 2 May 1974, the Authority approved a Development Plan submitted by the Massachusetts General Hospital as a basis for Section 112 credit toward the local share of the Boston urban renewal project. The credits in lieu of City cash created by this submission are approximately \$3,000,000.

After two public hearings by the Committee on Urban Development, the Boston City Council on 16 December 1974 approved the Development Plan subject to certain amendments being made in that Plan. The City Council requested that the Authority amend the Plan to delete all references to any proposed Ambulatory Care Center on the so-called Parcel 4B.

As these deletions do not represent a fundamental change from the Development Plan considered at the Authority's 14 February 1974 public hearing, no new public hearing is required for the Authority to approve this Plan.

As these changes will not affect our ability to receive the necessary non-cash credits, I request that the Authority approve the amended Plan as recommended by the Boston City Council.

VOTED: That the Boston Redevelopment Authority hereby approves the Massachusetts General Hospital Development Plan, dated 1 December 1973, as amended.